Effective October 1, 2000							09/857325					
a	CLAIMS AS	Column		(Colu	mn 2)	SMAL TYPE	LEI	vmr ⊃	OR	OTHER		
OTAL CLAIM	S					RAT	E	"FEE"	-	TATE	FEE	
OR		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	56.05	OR	BASIC FEE	710.00	
OTAL CHARGEABLE CLAIMS		42 minus 20=		. 22		XS	<del>ئ</del>	198	OR	X\$18=		
DEPENDENT CLAIMS		2 minus 3 =		•		X40	)= 	//-	OR	X80=		
JLTIPLE DEPI	ENDENT CLAIM P	RESENT				-				+270=		
the different	ce in column 1 is	less than 2	ero, ente	70° in c	olumn 2	+13	_	100	OR	TOTAL		
	CLAIMS AS A	• .	D - PAR	T.0		TOT		698	OR	OTHER		
01-09	(Column 1)		(Colu		(Column 3)	31112				. OMALL	ADDI-	
	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	Æ	ADDI- TIONAL FEE	,4	RATE	EIONAL FEE	
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						+13		43,000	ÖŘ			
~ .1			٠٠,			ADDIT.	TAL FEE		ÓR	TOTAL ADDIT. FEE	,	
11-00						•		¥	• • •			
- 110	(Column 1)		(Colu	mn 2)	(Column 3)		٠.		11.80		<i>i.</i>	
	(Column 1)		HG	EST			· .	ADDI-			ADDI-	
			HIGH		(Column 3) PRESENT EXTRA	RA	E	TIONAL		RATE	TIONAL	
	CLAIMS REMAINING		HIGH NUM PREVI	EST BER	PRESENT	RA	E		, A	RATE		
Total '	REMAINING AFTER	Minus	HIGH NUM PREVI	EST BER OUSLY	PRESENT	RA <sup>1</sup>		TIONAL	OF	\	TIONAL	
Total	CLAINS REMAINING AFTER AMENDMENT  3.4	Minus	PRICE NURS PRICE PAID	BER OUSLY FOR	PRESENT EXTRA		9=s	TIONAL	OR	X\$18=	TIONAL	
Total	REMARKING AFTER AMENDMENT	Minus	PRICE NURS PRICE PAID	BER OUSLY FOR	PRESENT EXTRA	XS XA	9= )=	TIONAL FEE	OA	X\$18=	TIONAL	
Total Independen	CLAINS REMAINING AFTER AMENDMENT  3.4	Minus	PRICE NURS PRICE PAID	BER OUSLY FOR	PRESENT EXTRA	X5 X44 +13	9= 2= 5= 5TAL	TIONAL FEE	OA ÒB	X\$18= =>X80= +270=	TIONAL	
Total Independen	REMAINING AFTER AMENDMENT  3.4  1.3.4  SENTATION OF M	Minus	PREVIOUS PAID	EST BER OUSLY FOR O	PRESENT EXTRA	XS XAI +13	9= 2= 5= 5TAL	TIONAL FEE	OA	X\$18= =>(80= +270=	TIONAL	
Total Independen	CLAIMS REMAINING AFTER AMENDMENT  3.4  - 3.4  - 3.4  SENTATION OF M	Minus	PREVIOUS PAID	EST BER OUSLY FOR T CLAIM	PRESENT EXTRA	XS XAI +13	9= 2= 5= 5TAL	TIONAL	OA ÒB	X\$18= =>X80= +270=	TIONAL	
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Total Independent FIRST PRE	CLAIMS REMAINING AFTER AMENDMENT  3.9  (Column 1) CLAIMS REMAINING AFTER AMENDMENT  • MENDMENT	Minus Minus Minus Minus	HEGGINUM PREVI PAID  *** /  *** /  *** /  CONUMEROR    FREVI PAID  *** /	EST BER OUSLY FOR  CLAIM T CLAIM T CLAIM T CLAIM	(Column 3) PRESENT EXTRA	XS X44 +13 RA XS X4 +13	9= O= O=	ADDI- TIONAL FEE	OR OR	X\$18= +270= TOTAL ADDIT. FEE  X\$18= X80=	ADDI- TIONAL FEE	

Application or Docket Number